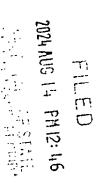
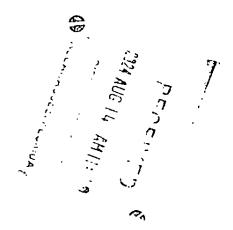
	(Requestor's Name)
	(Address)
((Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to a	Filing Officer:
	AUG 15 AUG

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2	0000000195				
REFERENCE : 57	6874 4358311				
AUTHORIZATION :	Color Bar				
COST LIMIT : \$	25.00				
					
ORDER DATE : August 5, 2024					
ORDER TIME : 4:54 PM					
ORDER NO. : 576874-050					
CUSTOMER NO: 4358311					
CHANGE OF AGENT					
NAME: CENTRIC DENIM RETAI	L LLC				
PLEASE RETURN THE FOLLOWING AS PROOF	OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Amanda Miller					
	/C THIMTAY C				
EXAMINER	'S INITIALS:				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: CENTRIC DENIM	A RET	AIL LI	LC	
2. (a)	350 FIFTH AVE		(b) 350 FIFTH AVE		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· '			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6TH FL		6T	H FL	
	NEW YORK, NY 10118	- -	NE	W YO	RK, NY 10118
	03/22/2016		M16	00000	2406
3.	Date of filing/registration in Florida	4.			Document number
5. (a)					
J. ()	Registered Agent and Registered Office shown on the records of the	ne Florie	da Dep	t. of Star	le:
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u></u>		-
	1200 SOUTH PINE ISLAND ROAD				2021
	1200 SOUTH PINE ISLAND ROAD , FL	33324			PILED PHIZ: 1.7
					新手面
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddross		- 유모 그
	the same of the sa	ymee <u>u</u>	<u>uures</u>	•	and and an
	Corporation Service Company				三
	NEW Registered Office Address:		_	-	
	1201 Hays Street				_
	Tallahassee	32301			
	, FL	<u> </u>	<u> </u>	0.771	
change agent v was/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabers.	egister pility c the lir	red of ompa nited	fice an ny, it i liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
/s/ Marc Goldfarb Marc Goldfarb, E				EVP	
Signa	ture of a member or authorized representative of a member		•		Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	e to ac erforn for in ereby c	et in th iance Chap confiri	iis cap of my ter 605 m that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signatu	Linare CKWOI				
	E. Kirby, Asst. Vice President Division of Corporations P.O. B	ox 632	27• T	allaha:	ssee, FL 32314

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
FILING FEE: \$25.00

CSC 576874